

# I/DD Program Bulletin



Please visit the MCO websites for billing and training opportunities in the month of January

Lunch and Learn Calls are Every Monday and Friday from 11:00 a.m. to 12:00 p.m.

Email questions to:  
[providerforum@kdads.ks.gov](mailto:providerforum@kdads.ks.gov)

Upcoming **Training Schedules** are available online at [kdads.ks.gov](http://kdads.ks.gov) under the "Provider Information" tab

## Bulletin Update for January 6, 2014

- + Lunch and Learn Calls
- + Plan of Care Update
- + BASIS Conversion Update
- + Provider Billing
- + Billing and Claims Update
- + Waiting List Funds
- + CDDO Contracts

### Ongoing:

**Lunch and Learn Calls:** Beginning with December 9<sup>th</sup>, KDADS hosted bi-weekly calls with I/DD system providers to address KanCare implementation issues. Calls are scheduled for Mondays and Fridays from 11:00-12:00 noon, we anticipate the calls will continue through the first quarter of 2014. Callers may submit questions to **PROVIDERFORUM@kdads.ks.gov**.

Registration for the calls is required and can be completed at the following website:  
[http://www.kdads.ks.gov/CSP/IDD/KanCare\\_Imp/IDD\\_Implementation\\_Calendar.html](http://www.kdads.ks.gov/CSP/IDD/KanCare_Imp/IDD_Implementation_Calendar.html)

**Call in Number: 1.866.620.7326**  
**Conference Code: 4283583031**

If you experience difficulty registering for the Lunch and Learn calls you may also register by sending your name in an email to [providerforum@kdads.ks.gov](mailto:providerforum@kdads.ks.gov)

**Plans of Care Update:** HP, the State fiscal agent, has completed its work with the HCBS-IDD plans of care that was necessary to implement the changes for the T2021 Day Supports service. You will recall the T2021 service replaces the previous T2020 Day Supports 1 unit = 1 day service and creates the Day Supports 1 unit = 15 minutes service. The plan of care updates have now been completed by HP. Also, with the delay in the inclusion of I/DD supports in KanCare we would ask CDDOs to restart submitting revisions or needed updates to existing plans of care as you have in the past and those will be reviewed by the State.

Effective 1/1/14, plans of care related issues may be directed to the following reviewer for their respective counties:

**Sandra:**

Sedgwick  
SEK  
WCDDO  
Hetlinger  
Arrowhead West  
Big Lakes  
COF  
Futures  
Harvey-Marion Co.  
Cowley  
DPOK  
DSNWK  
Butler  
ASNEK  
Reno  
Cottonwood

**Sandy:**

Johnson Co  
SDSI  
Brown Co.  
Tri-Valley  
Tri-Ko  
McPherson Co  
New Beginnings  
Twin Valley  
Shawnee Co  
Riverside Resources  
Nemaha Co

**BASIS Conversion:** KDADS IT staff continue to convert the data from the BASIS database to the new KAMIS system. Once all data is converted and migration is completed KDADS will advise I/DD stakeholders of additional training opportunities that will be available.

- ✚ KAMIS is up and running and ready for CDDOs to use. Many CDDOs have already started entering new and annual BASIS assessments. Scores and Notice of Action letters are generated in real time, and CDDOs can print the notices to send to the individual and their guardian. The historical data of previous assessments is not available in KAMIS at this time.
- ✚ KDADS IT Department has been receiving information on HCBS-IDD participants since March of 2013. They were entered into KAMIS and updated from MMIS, as needed, by our automated system. At the time, they had to be assigned a primary organization. At the time, all customers coming through the nightly file from MMIS were assigned to a AAA/ADRC. On the PD & TBI waivers, KDADS IT created a shell assessment so that the AAA/ADRC's would know who the customers were they needed to work. The customers on Autism, IDD, and TA were left with basically only a person information record. They didn't appear on any reports.
- ✚ KDADS is in the process of switching all those IDD customers primary organization to one of the CDDO's, using the residential county to determine the primary CDDO. This was to be accomplished prior to this week, but due to illness and a family emergency, the process did not start until last Friday. Customers can be found in KAMIS and a transfer can be manually requested within KAMIS from the AAA/ADRC. If you have problems initiating the transfer, please submit a Problem Report (use the link at the top of the page in KAMIS) or email the KDADS Help Desk for assistance.

## **Provider Billing**

Providers should continue billing through KMAP until the long-term supports and services for HCBS-IDD Participants are integrated into KanCare. The State will continue paying these claims as fee-for-service until IDD long-term supports and services are included in KanCare. Pilot providers should continue billing through the MCO during this time.

## **Billing and Claims Updates**

Through the IDD KanCare Pilot there have been four common claims and billing issues identified. The State has been working with the MCOs to ensure these identified issues do not cause payment disruption when HCBS/IDD long-term supports and services and Targeted Case Management services are implemented into KanCare. The identified issues and the plan are described below.

### **Missing Authorizations**

Due to the complexity of the Pilot Billing process in coordinating the Fee-for-service system with the MCO systems, there were issues with missing Plans of Care files being transmitted to the MCOs.

To ensure the plan of care transition does not cause a payment delay, the MCOs will not deny claims for missing HCBS/DD Plan of Care authorizations. Instead, there will be review processes in place prior to or after the claim is paid that will ensure a valid authorization is on file.

As the Authorization systems are validated by MCOs, the State and the MCOs will work to turn this edit back on.

### **Date Span Billing**

When billing MCOs for unit services that are equal to one day, providers are required to have the number of units billed match the date span.

Each MCO has training opportunities for providers that need clarity around date span billing. For implementation, MCOs will be relaxing their span edit to allow for units billed that do not match billing dates.

All MCOs will provide education to providers and work with the State to phase this edit back into the process at an appropriate time.

### **Third Party Liability (TPL)**

KDHE is currently reaching out to insurance carriers in an attempt to secure blanket denials for service codes in order to assist providers in submitting claims with TPL involved. Efforts have been successful in obtaining some blanket denials, but the State cannot obtain blanket denials from all carriers. Another avenue for obtaining blanket denials is through providers themselves.

KDHE asks that if you are able to get a blanket denial from a carrier for service(s), to please share those with the State so we may publish them for all providers to use. In order for the state to publish the denials for all providers to use, they must be blanket denials and not client-specific. That is, the letter from the carrier must state that it does cover the code(s) under any circumstances. A denial from the carrier that references a specific beneficiary or an EOB denial does not meet the criteria for a blanket denial.

You can submit all blanket denials to KDHE via fax at (785) 296-4813 or via email to [josterhaus@kdheks.gov](mailto:josterhaus@kdheks.gov).

If you have any questions, please feel free to contact Jason Osterhaus at (785) 296-2319 or [josterhaus@kdheks.gov](mailto:josterhaus@kdheks.gov).

### **Client Obligation**

Issues around the appropriate deduction of client obligation amounts from payments were identified during the pilot. The MCOs have made appropriate process changes to accurately assign client obligation amounts to claims to follow the State's HCBS process. In addition, MCOs will adjust claims for any retroactive client obligation changes made by the State.

## **Billing Education and Monitoring Efforts**

MCOs are providing various billing education opportunities to providers and have added staff to specifically provide outreach to or monitor IDD specific billing issues. Additionally, each MCO has developed a billing guide to address the most common billing issues and provide basic billing information. These documents will be shared with providers on the State websites. Finally, both the MCOs and the State will be monitoring payments compared to fee-for-service trends at a provider level to proactively identify any potential cash flow issues that may be on the horizon.

### **Waiting List**

As you may be aware, there was a proviso in the 2014 KDADS budget that caused \$4 million of new State General Funds waiting list money to lapse on January 1st if the IDD waiver was not included into KanCare. The \$4 million has lapsed from the KDADS budget due to the delay of integrating IDD long-term supports and services into KanCare on January 1, 2014. However, **KDADS would like to be clear that no person that has moved, or committed to move, from the unserved or underserved waiting list will be asked to go back to the waiting list for services.** KDADS and the Governor's office will work with the Legislature on a new proviso that will secure funding for the 178 persons that have already committed to or are receiving services. Over the next few weeks, KDADS will be working with the Governor's Office and Legislature on what should be done regarding the slots that has not been committed to as of yet. CDDOs should not offer HCBS-IDD Program services to any other individuals after January 1, 2014 until a decision has been made and communicated to the CDDOs.

### **CDDO Contracts**

Within the next few days, CDDOs will be receiving a brief contract addendum proposal that will address the continued CDDO responsibilities until the start date of KanCare for the I/DD long-term services and supports.